

jc872 U.S. PTO
09/919086
07/31/01

The filing fee is calculated as follows:

			SMALL ENTITY			LARGE ENTITY	
CLAIMS	NO. FILED	NO. EXTRA	BASIC FEE:			BASIC FEE:	
			\$355			\$710	
Total	8 - 20 =	- 0 -	X9	\$	OR	X18	\$
Independent	2- 3=	- 0 -	X40	\$	OR	X80	\$
<input type="checkbox"/> Multiple Dependent Claims Present			\$135	\$	OR	\$270	\$
			TOTAL	\$355.00	OR	TOTAL	\$

- ☐ The Commissioner is not authorized to charge the filing fee at this time as we elect to defer payment of the entire filing fee until receipt of a Notice to File Missing Parts.
- ☒ A check in the amount of **\$355.00** to cover the filing fee is enclosed.
- ☒ The Commissioner is hereby authorized to charge and/or credit **Deposit Account No. 50-1017 (Billing No. 210061.0030)** as noted below. A duplicate copy of this sheet is enclosed.
- ☒ Any overpayments or deficiencies in the above-calculated fee.
- ☐ Filing fee in the amount of \$_____ as calculated above.
- ☒ Any additional fees required under 37 C.F.R. § 1.16 and § 1.17.
- ☒ In the event that a Petition for Extension of Time is required during the prosecution of this application, but not submitted, please charge any extension fee under 37 C.F.R. § 1.136(a) to our Deposit Account noted above.

CORRESPONDENCE ADDRESS:

July 30, 2001 By: W. L. Schwabe, Reg. No. 25,918
(Date) *for* **LESLIE L. KASTEN, JR.**

Registration No. 28,959

AKIN, GUMP, STRAUSS, HAUER & FELD, L.L.P.

One Commerce Square

2005 Market Street - Suite 2200

Philadelphia, PA 19103

Telephone: 215-965-1200

Direct Dial: 215-965-1290

Facsimile: 215-965-1210

E-Mail: lkasten@akingump.com

☒ Customer Number or Bar Code Label: **000570**

LLK:sm
Enclosures